

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.		3. FEC Identification Number C C90005786
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800		
(c) City, State and ZIP Code Washington DC 20036-		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☐ 24-Hour Report
☒ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M / D D / Y Y Y Y Y Y
10 / 01 / 2012
THROUGH
M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES

20762.80

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Patrick Collins

Patrick Collins

10/17/2012

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 5
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee League of Conservation Voters, Inc.		Date MM / DD / YYYY 10 / 02 / 2012	
Mailing Address 1920 L Street, NW Ste 800		Amount 3.29	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Staff Time for Press Release		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1706.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Freestone Communications		Date MM / DD / YYYY 10 / 04 / 2012	
Mailing Address 231 South Bemiston Suite 1210		Amount 1520.35	
City Saint Louis	State MO	Zip Code 63105-1914	
Purpose of Expenditure Persuasion Calls		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3427.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Theresa Mandery		Date MM / DD / YYYY 10 / 04 / 2012	
Mailing Address 203 Hawley Ave Apt N		Amount 200.00	
City Syracuse	State NY	Zip Code 13203-2476	
Purpose of Expenditure Travel Stipend		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3427.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

1723.64

(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶

(c) TOTAL Independent Expenditures ▶
(carry total from last page forward to Line 7)

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NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee League of Conservation Voters, Inc.		Date MM / DD / YYYY 10 / 05 / 2012
Mailing Address 1920 L Street, NW Ste 800		Amount 2.86 Transaction ID : AEC418B9573A2422FA30
City Washington	State DC	
Zip Code 20036		
Purpose of Expenditure Staff Time for Press Release	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4194.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee League of Conservation Voters, Inc.		Date MM / DD / YYYY 10 / 05 / 2012
Mailing Address 1920 L Street, NW Ste 800		Amount 4.52 Transaction ID : A002F5003CB2B4DA6BB2
City Washington	State DC	
Zip Code 20036		
Purpose of Expenditure Staff & EMC HD Email	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4194.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Chi/Donahoe + Cole/Duffey		Date MM / DD / YYYY 10 / 05 / 2012
Mailing Address 2101 16th Street, NW #504		Amount 760.00 Transaction ID : A3D1152BD00F54AA5894
City Washington	State DC	
Zip Code 20009-6586		
Purpose of Expenditure Flat Earth Five Web Video	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4194.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ➤

767.38

(b) SUBTOTAL of Unitemized Independent Expenditures..... ➤

(c) TOTAL Independent Expenditures ➤
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 5
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NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee Theresa Mandery		Date MM / DD / YYYY 10 / 12 / 2012
Mailing Address 203 Hawley Ave Apt N		Amount 1320.63 Transaction ID : AC1EB1923694C414FA15
City Syracuse	State NY	
Zip Code 13203-2476		
Purpose of Expenditure Salary	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 5515.19		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Full Name (Last, First, Middle Initial) of Payee Mack Crounse Group		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address 2001 N. Beauregard Street Suite 420		Amount 1062.00 Transaction ID : AC75533E6646749DF847
City Alexandria	State VA	
Zip Code 22311		
Purpose of Expenditure Creative for Billboards	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 22466.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____
Full Name (Last, First, Middle Initial) of Payee League of Conservation Voters, Inc.		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address 1920 L Street, NW Ste 800		Amount 36.21 Transaction ID : A5DB6C26E6E234480916
City Washington	State DC	
Zip Code 20036		
Purpose of Expenditure Staff Time for Press Release	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 22466.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	2418.84
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 5
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NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies		Date MM / DD / YYYY 10 / 15 / 2012	
Mailing Address 3050 K Street NW, Suite 100		Amount 15852.94	
City Washington	State DC	Zip Code 20007-5108	
Purpose of Expenditure Billboards	Category/ Type	Transaction ID : A330A93F8A2204F50A18	
Name of Federal Candidate Supported or Opposed by Expenditure: Ann Marie Buerkle		Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 22466.34		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....		15852.94	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)		20762.80	